

# Acquired Von Willebrand Syndrome

Acquired [von Willebrand syndrome](#) (AVWS) is a rare bleeding disorder.

Désage et al. reported a case of AVWS due to a [monoclonal gammopathy](#) of undetermined significance, in which a transient but prolonged response to treatment by intravenous [immunoglobulin](#) (IVIG) was observed. The diagnosis was fortuitously made in a preoperative setting for neurosurgery, after biological exploration of an isolated prolonged [activated partial thromboplastin time](#). AVWS was confirmed by an accelerated clearance of an infused plasma-derived [von Willebrand factor](#) (VWF) concentrate. High doses of IVIG were used to perform the neurosurgery. Fifty-four days after IVIG, the patient was still responding to treatment with normal levels of factor VIII and VWF <sup>1)</sup>.

Complications arising from [antibiotic](#) use are of interest to neurosurgeons because many neurosurgical patients are treated for an [infection](#). In a report, Psarros et al. described three patients with spine disorders who developed coagulopathies after treatment with [levofloxacin](#), an antibiotic commonly used by neurosurgical services. Three patients with spine disorders developed [urinary tract infections](#) (UTIs) for which they received a 3-day course of oral levofloxacin. Subsequently, they demonstrated prolonged [prothrombin times](#) and increased [international normalized ratios](#). One of those patients later developed acquired von Willebrand syndrome during surgery. Coagulopathies were successfully corrected preoperatively with parenteral [vitamin K](#). The patient with acquired von Willebrand syndrome required multiple [transfusions](#). There seems to be an association between levofloxacin and coagulation abnormalities in neurosurgical patients treated for UTIs. Neurosurgical services prescribing this common antibiotic should be aware of this problem <sup>2)</sup>.

<sup>1)</sup>

Désage S, Le Quellec S, Karlin L, Lienhart A, Meunier S, Rugeri L. A Prolonged Treatment Response in Acquired Von Willebrand Syndrome. *Hamostaseologie*. 2019 Sep 23. doi: 10.1055/s-0039-1696960. [Epub ahead of print] PubMed PMID: 31546261.

<sup>2)</sup>

Psarros T, Trammell T, Morrill K, Giller C, Morgan H, Allen B. Abnormal coagulation studies associated with levofloxacin. Report of three cases. *J Neurosurg*. 2004 Apr;100(4):710-2. PubMed PMID: 15070128.

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